



Gp/1645

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**TRANSMITTAL
FORM**

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TRANSMITTAL FORM (to be used for all correspondence after initial filing)	Application	09/386,709	
	Filing Date	8/31/1999	
	First Named	David Brayden	
	Group Art Unit	1645	
	Examiner Name	J. Graser	
Total Number of Pages in This Submission	2	Attorney Docket Number	P26,488-A-USA

ENCLOSURES (check all that apply)

<input type="checkbox"/> Fee Transmittal Form <input type="checkbox"/> Fee Attached <input type="checkbox"/> Amendment / Response <input type="checkbox"/> After Final <input type="checkbox"/> Affidavits/declaration(s) <input type="checkbox"/> Extension of Time Request <input type="checkbox"/> Express Abandonment Request <input type="checkbox"/> Information Disclosure Statement <input type="checkbox"/> Certified Copy of Priority Document(s) <input type="checkbox"/> Response to Missing Parts/ Incomplete Application <input type="checkbox"/> Response to Missing Parts under 37 CFR 1.52 or 1.53	<input type="checkbox"/> Assignment Papers (for an Application) <input type="checkbox"/> Drawing(s) <input type="checkbox"/> Licensing-related Papers <input type="checkbox"/> Petition <input type="checkbox"/> Petition to Convert a Provisional Application <input checked="" type="checkbox"/> Power of Attorney, Revocation Change of Correspondence <input type="checkbox"/> Terminal Disclaimer <input type="checkbox"/> Request for Refund <input type="checkbox"/> CD, Number of CD(s) _____	<input type="checkbox"/> After Allowance Communication to Group <input type="checkbox"/> Appeal Communication to Board of Appeals and Interferences <input type="checkbox"/> Appeal Communication to Group (Appeal Notice, Brief, Reply Brief) <input type="checkbox"/> Proprietary Information <input type="checkbox"/> Status Letter <input type="checkbox"/> Other Enclosure(s) (please identify below): <div style="border: 1px solid black; padding: 10px; text-align: center;">RECEIVED DEC 19 2002 TECH CENTER 1600/2900</div>
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SIGNATURE OF APPLICANT, ATTORNEY, OR AGENT

Firm or Individual name	Synnstvedt & Lechner LLP
Signature	<i>Marilou E. Watson</i>
Date	December 12, 2002

CERTIFICATE OF MAILINGI hereby certify that this correspondence is being deposited with the United States Postal Service with sufficient postage as first class mail in an envelope addressed to: Commissioner for Patents, Washington, D.C. 20231 on this date: **December 12, 2002**

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IN THE UNITED STATES PATENT AND TRADEMARK OFFICE

Inventor: David J. Brayden

Application No.: 09/386,709

Confirmation No.: 1709



Examiner: J. E. Graser

Group Art Unit: 1645

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Filed: August 31, 1999

Attorney Docket No.: P26,488-A USA

Elan Docket No.: 99.1081.US

Title: ORAL VACCINE COMPOSITIONS

COMMISSIONER FOR PATENTS

WASHINGTON, DC 20231

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JM
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**REVOCATION OF PREVIOUS ASSOCIATE POWER OF ATTORNEY
AND NEW APPOINTMENT OF ASSOCIATE POWER OF ATTORNEY**

Sir:

I hereby revoke all previous associate powers of attorney given in the above-identified application:

As a principal practitioner of record, I hereby appoint the following attorneys as associate attorneys to prosecute and transact all business in the Patent and Trademark Office connected therewith.

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Joseph M. Imhof	Reg. No. 41,863		

Please direct all future correspondence to:

Marilou E. Watson
Synnestvedt & Lechner LLP
2600 ARAMARK Tower
1101 Market Street
Philadelphia, PA 19107-2950
(215) 923-4466

2 December 2002
Dated

Kirsten A. Anderson
Kirsten A. Anderson
Registration No. 38,813